

TOWN OF TOLLAND, MA
Building Department
Building Permit Application – Short Form
For Sheds, Windows, Roofs, Siding or Residing, Swimming Pools, etc.

Building Permit Number _____ Date: _____

Issued: _____ Signature: _____

Building Inspector

SECTION 1- SITE INFORMATION

Property Address _____ Assessors Map Number _____ Parcel Number _____

Owner's Name _____ Home Telephone # _____

Home Address _____ Work Telephone # _____

Building Setbacks (ft). Front _____ Left Side _____ Right Side _____ Back _____

Other _____

SECTION 2-CONSTRUCTION SERVICES

_____ Company Name _____ Address _____

Phone: _____ **email:** _____

Construction Supervisor _____ Mass. License Number _____

Home Improvement Contractor _____ Mass. License Number _____

Check One

_____ Application for Permit to _____

_____ Application for a Permit to Demolish a Building or Structure

SECTION 3: Description of Proposed Project

4. Attach plot plan showing location of buildings or structures. (i.e. Accessory Buildings and Swimming Pools)

5. Estimated cost of project \$ _____

The undersigned Applicant certifies that the above statements are true to the best of his knowledge.

ACTION OF THE BUILDING INSPECTOR Date _____

Permit # _____ **Fee \$** _____

INSPECTION TIME SCHEDULED (Call 24 hours in advance for Inspector:

Accepted Date _____ **Rejected: Date** _____

Building Inspector